Docket No.: PN0369

Application No.: To be assigned Filing Date: To be assigned Group Art Unit: To be assigned Examiner: To be assigned

the specification of which

Declaration Submitted With/After Initial Filing

## DECLARATION AND POWER OF ATTORNEY FOR PATENT APPLICATION

As a below named inventor, I hereby declare that:

My residence, post office address and citizenship are as stated below next to my name,

I believe I am the original, first and sole inventor (if only one name is listed below) or an original, first and joint inventor (if plural names are listed below) of the subject matter which is claimed and for which a patent is sought on the invention entitled:

## OPTICAL IMAGING OF ENDOMETRIOSIS

•			
() OD	is attached hereto.		
OR [x]	was filed on as United States Application No or PCT International Application No. PCT/N02004/000286 and was amended on(if applicable)		
I herel specifi	by state that I have revication, including the c	iewed and understand the cor claims, as amended by any an	ntents of the above identified nendment referred to above.
inform	owledge the duty to di nation known to me to al Regulations, Section	be material to patentability a	atent and Trademark Office all s defined in Title 37, Code of
or (f) or Section other in box.	or Section 365 (b) of a on 365(a) of any PCT I than the United States, any foreign application	iny foreign application(s) for international application which, listed below and have also in for patent or inventor's cert	nited States Code, Section 119(a)-(d) patent or inventor's certificate, or the designated at least one country dentified below, by checking the difficate or PCT International tion on which priority is claimed.
(Appli	20034351 cation Serial No.)	Norway (Country)	29 September 2003 (Day/Month/Year Filed)

I hereby claim the benefit under 35 U.S.C. Section 119(e) of any United States provisional patent application(s) listed below:

(Application Serial No.) (Day/Month/Year Filed)

I hereby claim the benefit under 35 U.S.C. Section 120 of any United States application(s), or Section 365(c) of any PCT International application(s) designating the United States, listed below and, insofar as the subject matter of each of the claims of this application is not disclosed in the prior United States or PCT International application in the manner provided by the first paragraph of 35 U.S.C. Section 112, I acknowledge the duty to disclose to the United States Patent and Trademark Office all information known to me to be material to patentability as defined in Title 37, CFR Section 1.56 which became available between the filing date of the prior application and the national or PCT International filing date of this application:

NO2004/000286 28 September 2004
(Application Serial No.) (Day/Month/Year Filed) (Status)
(patented, pending, ahandoned)

As a named inventor, I hereby appoint the following attorneys or agents to prosecute this application and transact all business in the United States Patent and Trademark Office connected therewith:

Customer Number: 36335

 Robert F. Chisholm
 (Reg. No. 39,939)

 Gerald J. Boudreaux
 (Reg. No. 35,073)

 Li Cai
 (Reg. No. 45,629)

 Craig Bohlken
 (Reg. No. 52,628)

 Dwayne L. Bentley
 (Reg. No. 45,947)

 Yonggang Ji
 (Reg. No. 53,073)

Send correspondence to: GE Healthcare, Inc.

IP Department 101 Carnegie Center

Princeton, New Jersey 08540

Direct telephone calls to: (609) 514-6530

Direct facsimiles to: (609) 514-6572

I hereby declare that all statements made herein of my own knowledge are true and that all statements made on information and belief are believed to be true; and further that these statements were made with the knowledge that willful false statements and the like so made are punishable by fine or imprisonment, or both, under Section 1001 of Title 18 of the United States Code and that such willful false statements may jeopardize the validity of the application or any patent issued thereon.

Full name of first inventor:

Jo Klaveness

Inventor's signature:

OU NACCINA

Date:

\_\_\_\_

Post Office Address:

Midtasen 5 N-1166 Oslo Norway

Citizenship:

Norway

Full name of second inventor: Edyin Johannesen

Inventor's signature:

Post Office Address:

Date:

GE Healthcare AS

P.O. Box 4220 Nydalen

Nycoveien 1-2

N-0401 Oslo, Norway

Citizenship:

Norway

Full name of third inventor: Helge Tolleshaug

Inventor's signature:

Date:

Post Office Address:

GE Healthcare AS

P.O. Box 4220 Nydalen

Nycoveien 1-2

N-0401 Oslo, Norway

Citizenship:

Norway